



City of White Bear Lake
Building Department | White Bear Lake & Mahtomedi
4701 Highway 61 N.
White Bear Lake, Minnesota 55110
651-429-8518 | www.whitebearlake.org
buildingdepartment@whitebearlake.org

FIRE RELATED PERMIT APPLICATION

Site Information		
Site Address:	Date:	
<input type="checkbox"/> White Bear Lake <input type="checkbox"/> Residential <input type="checkbox"/> Commercial	PID #:	
Property Owner		
Name:	Phone:	
Address:	City:	
Email:	State/Zip:	
Contractor		
Company Name:	Phone:	
Contact:	License #:	
Address:	City:	
Email:	State/Zip:	
Project Information		
<input type="checkbox"/> New	<input type="checkbox"/> Dry Sprinkler System	Number of Heads: _____
<input type="checkbox"/> Replace	<input type="checkbox"/> Wet Sprinkler System	Number of Heads: _____
<input type="checkbox"/> Alteration	<input type="checkbox"/> Storage Tank Install	Size of Tank(s): _____
<input type="checkbox"/> Repair	<input type="checkbox"/> Storage Tank Removal	Size of Tank(s): _____
	<input type="checkbox"/> Fire Alarm System	
	<input type="checkbox"/> Chemical/Ansul	
	<input type="checkbox"/> Other:	
Project Description: _____		
PROJECT VALUATION (REQUIRED):		

This permit shall be null and void if authorized work is not started within 180 days or if work is suspended or abandoned for 180 days or more after work is started. The undersigned hereby represents upon all of the penalties of the law, for the purpose of including the City of White Bear Lake/Mahtomedi to take the action herein request, that all statements are true and that all work herein will be done in accordance with the ordinances of the City of White Bear Lake/Mahtomedi and the State of Minnesota.

Applicant Signature: _____ Date: _____

For permit submission requirements, see corresponding handout at www.whitebearlake.org.
 For current permit fees, see the current White Bear Lake/Mahtomedi fee schedules at www.whitebearlake.org.

Office Use Only – Required Inspections														
<input type="checkbox"/>	<input type="checkbox"/>	Conductivity	<input type="checkbox"/>	<input type="checkbox"/>	Flow Test	<input type="checkbox"/>	<input type="checkbox"/>	Hood System	<input type="checkbox"/>	<input type="checkbox"/>	Pneumatic	<input type="checkbox"/>	<input type="checkbox"/>	Rough In
<input type="checkbox"/>	<input type="checkbox"/>	Final	<input type="checkbox"/>	<input type="checkbox"/>	Flush	<input type="checkbox"/>	<input type="checkbox"/>	Hydrostatic	<input type="checkbox"/>	<input type="checkbox"/>	Pre-Removal	<input type="checkbox"/>	<input type="checkbox"/>	Tamp/Valve
<input type="checkbox"/>	<input type="checkbox"/>	Fire Pump	<input type="checkbox"/>	<input type="checkbox"/>	Head Locations	<input type="checkbox"/>	<input type="checkbox"/>	Pipe/Nozzle	<input type="checkbox"/>	<input type="checkbox"/>	Post-Removal	<input type="checkbox"/>	<input type="checkbox"/>	Trip Test
Permit Approved By: _____						Date: _____								
Final Approval: _____						Date: _____								